Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1996												
CLAIMS AS FILED - PART (Column 1)				TI (Column 2)			SMALLENTITY			OTHER THAN OR SMALL ENTITY		
FOR NUI			BER FILED		NUMBER EXTRA			RATE	FEE		RATE	FEE
BASI	C FEE								285.00	OR		770.00
TOTAL CLAIMS			2/ minus 20 =		• 4			x\$11′=		2	×\$22=	7 7
INDE	PENDENT CLA	AIMS	minus 3 =			. 3		x4ő≟,		OR	x80=	740
MULTIPLE DEPENDENT CLAIM PRESENT								<b>.</b>			res Marie	Q70;
* If the difference in column 1 is less than zero, enter "0" in column 2								<b>4-130</b> ≌		OR	<del>+</del> 260=	
TOTAL OR TOTAL											1034	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							,	<b>679.61.4</b>	ورمشونیت و ما	OR		RTHAN
1 2		CLAIMS			GHEST	(Column 3)	1 6	SMALL	ENTITY	Un	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER		N	UMBER	PRESENT		RATE	ADDI- TIONAL:		DATE	ADDI- TIONAL
		AMENDMENT			VIOUSLY VID FOR	EXTRA		DAIE	FEE		RATE	FEE
	Total	*	Minus	**	·	=		x\$11=		OR	x\$22=	1
	Independent	*	Minus	***	. (4.7)	* * * *.		x40=		OR	x80=	
ď	FIRST PRES	SENTATION OF	MULTIPLE	DEPE	NDENT ČL	AIM	a 45	+130=		OR	+260=	, i
TOTAL ADDIT FEE										OR	TOTAL	r é
AMENDMENT B		(Column 1) CLAIMS	Sin Parlan		Olumn 2)	(Column 3)	7 r	1.000	in sherila i	a .	A A	
		REMAINING		. N	GHEST UMBER	PRESENT	->	DATE	ADDI:	10		ADDI-
		AFTER AMENDMENT			VIOUSLY VID FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		x\$11=		OR	x\$22=	757 757
	Independent	<b>*</b> 9	Minus	***				x40=		OR.	x80=	4.5
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=									OR	+260=	
			er e			v si	- <b>Ι</b> Δ1	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)	de la la la de Marion	(Accept	olumn 2)	(Cölumn 3)	^`` 1	JUII. I CE	na rojek je		ADDIT! FEET	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NI PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		_		x\$11= /		OR	x\$22=	
	Independent	*	Minus	***				x40=	41 #	OR	x80=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=								OR	+260=	4	
** If 1	he "Highest Nur	mn 1 is less than th	d FacilN THIS	SPAC	F is lace than	20 answer *20 "	'L	TOTAL		ÓΒ	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT FEE  ADDIT FEE  OR  ADDIT FEE												You